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PTO/SB/97 (09-04)

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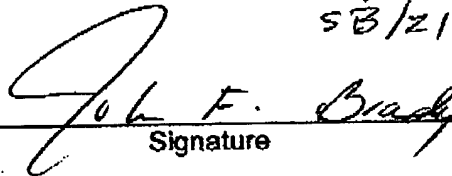
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09/812,291

Supp. Amendment (11pp.)  
SB/21  
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39118  
Registration Number, if applicable

4082930880  
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PTO/5B/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/812,291
	Filing Date	1-20-2001
	First Named Inventor	TANGELLAPALLY
	Art Unit	3626
	Examiner Name	Gotschalk
Total Number of Pages in This Submission	Attorney Docket Number	01-101

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center; margin-top: 10px;"> <i>Supplemental Amendment (11 pp.)</i> </div>
<div style="border: 1px solid black; padding: 2px; min-height: 40px;">             Remarks           </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Koot Hill Law Group	
Signature	John F. Brady	
Printed name	John F. Brady	
Date	AUG. 3, 2005	Reg. No. 39118

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FAX NO. :

Aug. 03 2005 04:13PM P3

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Attorney Docket No.: 01-101

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Tangellapally

Examiner: Gottschalk

Serial No.: 09/812,291

Art Unit: 3626

Confirmation No: 2280

Filed: Jan. 20, 2001

For: A SECURE ELECTRONIC HEALTHCARE  
INFORMATION PROCESS AND SYSTEM

**SUPPLEMENTAL AMENDMENT**

Assistant Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Applicant has considered the Office Action mailed April 29, 2005 and offers the following remarks. The present Amendment is Supplemental to the Amendment dated July 17, 2005.

Please amend the application as follows:

Amendments to the Claims are reflected in the listing of Claims which begins on Page 2.

Remarks/Arguments begin on page 11 of this paper.